NOV 2 1 2003

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

PRADEMA OX E2X (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

09/26/2003

GENENCOR INTERNATIONAL, INC. ATTENTION: LEGAL DEPARTMENT 925 PAGE MILL ROAD PALO ALTO, CA 94304

Note: A certificate of mailing can only be used for domestic mailings of the Fee(5) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

1 hereby certify that this Fee(3) Transmittal is being deposited with the United
States Postal Service with sufficient postage for first class mail in an envelope
addressed to the Mail Stop ISSUE FEE address above, or being facsimile
transmitted to the USPTO, on the date indicated below.

-- Carol A. See (Depositor's name) (Signature November 21, 2003 (Date

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
|-----------------|-------------|-----------------------|---------------------|------------------|--|
| 10/037-677 | 10/23/2001 | Volker Schellenberger | GC\$60-D1 | 1582 | |

TITLE OF INVENTION: DIRECTED EVOLUTION OF MICROORGANISMS

| APPLN. TYPE | SMALL ÉNTITY | ISSUE PEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE | |
|---|---------------------------------|--------------------------|---|--|-------------------|--------|
| nonprovisional | МО | \$1300 | \$300 | . \$1600 | 12/26/2003 | |
| EXAN | MINER | ART UNIT | CLASS-SUBCLASS · | 7 | | |
| MARVIC | H, MARIA | 1636 | 435-170000 | _ | | |
| FR 1.363). | ce address or indication of "Fe | | 2. For printing on the patent front page names of up to 3 registered patent agents OR, alternatively, (2) the name firm (having as a member a registered | attorneys or 1 Gener e of a single lanorney or 2 | cor International | l, Ind |
| O "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | on form of a Customer | agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | |

PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

| Genencor International, | Inc. Palo Alto, | California | E | |
|--|---|--|--|--------------------|
| Please check the appropriate assignee category or | categories (will not be printed on the patent); | 🗆 individual | in corporation or other private group of | entity @government |
| 4a. The following fee(s) are enclosed: | 4b. Payment of Fee(s): | | | |
| XIssue Fee | ☐ A check in the and | ount of the fee(s) i | s enclosed. | |
| ☐ Publication Fee | ☐ Payment by credit | ☐ Payment by credit card. Form PTO-2038 is attached. | | |
| ☐ Advance Order - # of Copies | Deposit Account Nu | XD The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 07-1048 (enclose an extra copy of this form). | | |
| Director for Patents is requested to apply the Issue | Fee and Publication Fee (if any) or to re-apply | y any previously p | aid issue fee to the application identifie | ed above. |
| (Authorized Signature) | (Date) 11/20/03 | 11/24/2003 | AWONDAF2 00000033 071048 | 10037677 |
| NOTE: The Issue Fee and Publication Fee (if other than the applicant, a registered attorney interest as shown by the records of the United Sta | required) will not be accepted from anyone or agent; or the assignee or other party in | 01 FC:1501 02 FC:1504 | | |
| This collection of information is required by 37 obtain or retain a benefit by the public which i application. Confidentiality is governed by 35 U estimated to take 12 minutes to complete, included completed application form to the USPTO. To case. Any comments on the amount of time suggestions for reducing this burden, should be Patent and Trademark Office, U.S. Depart 22313-1450. DO NOT SEND TEES OR CO. SEND TO: Commissioner for Patents, Alexandri | is to full (and by the USTIO to process) and S.C. 122 and 37 CFR 1.14. This collection is ding gathering, preparing, and submitting the me will vary depending upon the individual you require to complete this form and/or sens to the Chief Information Officer, U.S. ment of Commerce, Alexandria, Virginia MPLETED FORMS TO THIS ADDRESS. | .* . | | |
| Under the Paperwork Reduction Act of 1995 collection of information unless it displays a valid | , no persons are required to respond to a d OMB control number. | | | |

TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (Rev. 08/03) Approved for use through 04/30/2004.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE



| WER GES | | Serial No. 10/037,677 Docket No. GC560-D1 | | |
|-----------------------|--|---|--|--|
| | FAX COVER SHEET | Urgent Confidential Action Required Reply Requeste For Your Info. | | |
| TO: | MS Issue Fee | | | |
| OF: | USPTO | | | |
| Fax No.: | 703-746-4000 (Issue Fee Facsimile No | .) | | |
| FROM: | Carol See for Kamrin MacKnight, Patent Attorney | | | |
| LOCATION: | GENENCOR INTERNATIONAL, INC. Legal Department 925 Page Mill Road Palo Alto, CA 94304-1013 Tel: 650-846-7549 Fax: 650-845-6504 | | | |
| DATE: | November 21, 2003 | | | |
| NUMBER OF PA | AGES TO FOLLOW: 2 SENT BY: | cas | | |
| RE: Serial No. 10/ | /037,677, Docket No. GC560-D1 | | | |
| Attachments: Iss | ue Fee Transmittal Letter (1 page) in duplica | ate. | | |
| The original of this | facsimile will be sent to you via: | | | |
| Regular Mail | ☐ Overnight Mail ☐ Hand Delivery ☒ Will N | lot Be Sent | | |
| NOTE: The information | contained in this facsimile message is confidential and nate tended only for the use of the above named individual(s). | nay be subject to attorney- If you are not the intended | | |

recipient, you are hereby notified that any dissemination, distribution or copying of this communication Is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone (650/846-7517) and return the original transmission to us by mail.